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CONFIRMATION NO. 6412

SERIAL NUMBER 10/763,132	FILING DATE 01/22/2004 RULE	CLASS 221	GROUP ART UNIT 3651	ATTORNEY DOCKET NO. 3088.2.1	
APPLICANTS Brad Wood, Wellsville, UT;					
** CONTINUING DATA *****					
** FOREIGN APPLICATIONS *****					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 04/27/2004					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Allowance</i> Examiner's Signature <i>TW</i> Initials		STATE OR COUNTRY UT	SHEETS DRAWING 4	TOTAL CLAIMS 18	INDEPENDENT CLAIMS 3
ADDRESS Starkweather & Associates 9035 S 1300 E Suite 200 Sandy , UT 84094					
TITLE Apparatus, system, and method for a medication access control device					
FILING FEE RECEIVED 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____		

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